

STATE OF SOUTH CAROLINA**(Caption of Case)**

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

Pickmyrides Transportation LLC

**BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA**

TRANSPORTATION COVER SHEET**DOCKET**

NUMBER: _____ - _____ - _____

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: Terrence Cheeseboro

Telephone: 803-707-6708

Address: 101 Steeplechase N Rd

Fax: _____

Columbia, SC 29209

Other: _____

Email: pickmyridetransport@gmail.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

☐ Application - Class A/A Restricted

☒ Application - Class C Taxi

☒ Application - Class C Charter

☐ Application - Class C Charter Bus

☒ Application - Class C Non-Emergency

☐ Application - Class C Stretcher Van

☒ Application - Class E Household Goods

☐ Application - Class E Hazardous Waste

☐ Application

☐ Request for Extension to Comply with Order

☐ Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded

☐ Request for Cancellation of Certificate

☐ Request for Suspension

☐ Request for Reinstatement

☐ Request for Name Change on Certificate

☐ Request to Amend Scope of Authority

☐ Request to Amend Tariff (rate increase, etc.)

☐ Request to Amend Passenger Limit

☐ Request

☐ Exhibit

☐ Late-Filed Exhibit

☐ Letter

☐ Proposed Order

☐ Publisher's Affidavit

☐ Reservation Letter

☐ Response

☐ Return to Petition

☐ Other: _____

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MAIL / DMS**

js

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

ACCEPTED FOR PROCESSING
02/09/2022 February 9 1:36 PM - SC PSC - 2022-69-T - Page 1 of 13

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
101 Executive Center Drive, Suite 100
Columbia, South Carolina 29210

Phone: (803) 896-5100 Fax: (803) 896-5199

**APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR
OPERATION OF MOTOR VEHICLE CARRIER**

Date: February 1, 2022

CLASS C - CHARTER

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provisions of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Pickmyrides Transportation LLC
Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name)
- 101 Steeplechase N Rd Columbia, SC 29209
Street Address of Applicant
- PO Box 432 Cameron, SC 29030
Mailing Address of Applicant (if different from street address)
- 803-707-6708
Phone Fax
- pickmyridestransport@gmail.com
Email Address
2. If the Applicant is an LLC or a corporation, a copy of the Certificate of Existence from the South Carolina Secretary of State and the Articles of Incorporation must be attached. (If incorporated outside of SC, attach South Carolina Secretary of State "Foreign Corporation" Certificate.)
3. Select Entity Type: (Check one)
- ☒ Individual Owner/Sole Proprietorship
- ☐ Partnership - List names and addresses of all person having an interest in the business.
- ☐ Corporation - List names and addresses of two principal officers.

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

Financial Statement

Applicant's assets and liabilities are as follows:

<u>Assets:</u>		<u>Liabilities:</u>	
Value of Real Estate	320,000	Mortgage/Loan on Real Estate	1,300
Value of Motor Vehicles	55,000	Loans Owed on Motor Vehicles	
Cash on Hand	1,000	Business/Other Loans Owed	
Cash in Bank	10,000	Other Liabilities or Debts	
Value of Other Assets and Equipment	8,000	Total Liabilities	1,300
Total Assets	394,000		

INSTRUCTIONS:

1. "Value of Real Estate" means the actual or estimated market value of any real property/buildings owned by the Company/Business Applying for a Certificate.
2. "Mortgage/Loan on Real Estate" means the outstanding balance on any Mortgage, Equity Line or other Loan secured by the Real Estate listed in Item 1.
3. "Value of Motor Vehicles" means the actual or fair estimated value of any moving vans, trucks or other vehicles owned by the Company/Business Applying for a Certificate.
4. "Loans Owed on Motor Vehicles" means the outstanding balance on any loans or liens on the vehicles listed in Item 3.
5. "Cash on Hand" is the total of actual cash held by the Company/Business applying for a Certificate on the day this form is filled out.
6. "Business/Other Loans Owed" means the outstanding balance on any small business loan or other unsecured loan made by a person, bank or business to the Business/Company applying for a Certificate.
7. "Cash in Bank" means the current balance in checking accounts, savings accounts or the like in the name of the Company/Business applying for a Certificate. Do not include retirement accounts or personal bank account balances.
8. "Value of Other Assets and Equipment" should include the actual or estimated value of items such as office equipment (computers/furnishings), moving equipment (hand trucks/blankets/strapping), and trailers.
9. "Other Liabilities or Debts" means specific amounts/balances which the Company/Business applying for a Certificate knows that it owes to other persons or companies; for example Franchise Fees. This does NOT include regular bills such as electricity bills, security system costs, insurance, salaries, etc.

PROPOSED RATES AND CHARGES FOR SERVICEProposed Rates and Charges:

Current rates will \$1.25 per mile.

Requested Scope of Authority: Check all counties in which you are requesting permission to operate.
You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina.

<input type="checkbox"/> Abbeville	<input type="checkbox"/> Cherokee	<input type="checkbox"/> Florence	<input type="checkbox"/> Lee	<input type="checkbox"/> Saluda
<input type="checkbox"/> Aiken	<input type="checkbox"/> Chester	<input type="checkbox"/> Georgetown	<input type="checkbox"/> Lexington	<input type="checkbox"/> Spartanburg
<input type="checkbox"/> Allendale	<input type="checkbox"/> Chesterfield	<input type="checkbox"/> Greenville	<input type="checkbox"/> Marion	<input type="checkbox"/> Sumter
<input type="checkbox"/> Anderson	<input type="checkbox"/> Clarendon	<input type="checkbox"/> Greenwood	<input type="checkbox"/> Marlboro	<input type="checkbox"/> Union
<input type="checkbox"/> Bamberg	<input type="checkbox"/> Colleton	<input type="checkbox"/> Hampton	<input type="checkbox"/> McCormick	<input type="checkbox"/> Williamsburg
<input type="checkbox"/> Barnwell	<input type="checkbox"/> Darlington	<input type="checkbox"/> Horry	<input type="checkbox"/> Newberry	<input type="checkbox"/> York
<input type="checkbox"/> Beaufort	<input type="checkbox"/> Dillon	<input type="checkbox"/> Jasper	<input type="checkbox"/> Oconee	
<input type="checkbox"/> Berkeley	<input type="checkbox"/> Dorchester	<input type="checkbox"/> Kershaw	<input type="checkbox"/> Orangeburg	<input checked="" type="checkbox"/> Statewide
<input type="checkbox"/> Calhoun	<input type="checkbox"/> Edgefield	<input type="checkbox"/> Lancaster	<input type="checkbox"/> Pickens	
<input type="checkbox"/> Charleston	<input type="checkbox"/> Fairfield	<input type="checkbox"/> Laurens	<input type="checkbox"/> Richland	

DESCRIPTION OF EQUIPMENT

You are **not** required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

Maximum Number of Passengers Vehicle is Equipped to Carry: (The number of passengers a vehicle is equipped to carry is based on the number of seatbelts in the vehicle, including the driver's seatbelt.)

- ☒ 1-7 Passengers, including driver
☐ 8-15 Passengers, including driver

MAKE	YEAR & MODEL	VIN#	EMPTY WEIGHT
2008	Ford Expedition EL	1FMFK20568LA07634	5578
2003	Ford Expedition	1FMPU15L03LB37062	4159
2010	Infiniti FX35	JN8AS1MU9AM801204	3757
2011	Chevy Camaro SS	2G1FK3DJ3B9170251	3741

INSURANCE QUOTE

This form **MUST BE COMPLETED.**

The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested. You will not be required to purchase insurance until your application has been approved and an order has been issued by the PSC. THIS IS ONLY A QUOTE

The following insurance quote is for:

Terrence R. Cheeseboro

Name of Applicant

101 Steeplechase North Road Columbia, SC 29209

Address of Applicant

Amount of Premium:**Limits Quoted: (See Below)**

Liability Insurance \$ 2783.03

Limits 1-7 Passengers* \$ 25,000/50,000/25,000

The above quoted premium is for a term of 6 months.

Minimum Limits - Intrastate Only:

1-7 Passengers* \$ 25,000/50,000/25,000

* Passengers = Number of seatbelts in the vehicle including the driver's seatbelt

8-15 Passengers* \$ 25,000/100,000/25,000

USAA

Name of Insurance Company

9800 Fredrickburg Rd, San Antonio, TX 78288

Home Office Address of Company

I, the Applicant, am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

NOTICE:

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact the Department of Motor Vehicles at (803) 896-8457 or (803) 896-9903.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.

Exhibit Fit, Willing, and Able (FWA)

Terrence R Cheeseboro
Name of Applicant

1. Are there currently any outstanding judgments against the Applicant?

☐ Yes ☒ No

If Yes, list judgements here:

2. Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?

☒ Yes ☐ No

3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

☒ Yes ☐ No

Exhibit on Driver Qualifications

1. Applicant understands that all drivers must be a minimum of 18 years of age.

☒ Yes ☐ No

2. Applicant understands that a certified copy of the driver's three (3) year driving record issued by the SC DMV and such record from the DMV of the state in which the driver is or has been domiciled for such period must be maintained in the Applicant's business office.

☒ Yes ☐ No

3. Applicant understands that a criminal history background check from the state where the driver currently lives must be maintained in the Applicant's business office.

☒ Yes ☐ No

4. Applicant understands that all drivers operating a vehicle under a Class C Certificate must have in their possession when operating a charter vehicle, a valid driver's license issued by the SC DMV or the current state of residence of the driver.

☒ Yes ☐ No

5. Applicant understands that all Class C Certificate holders are prohibited from employing or leasing vehicles to drivers who are registered, or required to be registered, as sex offenders with the South Carolina State Law Enforcement Division or any national registry of sex offenders.

☒ Yes ☐ No

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
101 EXECUTIVE CENTER DRIVE, SUITE 100
COLUMBIA, SOUTH CAROLINA 29210

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 2, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

S.C. Code Ann. Section 58-3-250 states, in part, that every final order of the Commission must be served by electronic service, registered or certified mail, upon the parties to the proceeding or their attorneys.

Please check the applicable box:

- ☒ The Applicant AGREES to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System. The Applicant authorizes the Commission to serve its orders by using the e-mail address as it appears on page one of this Application. To sign up for eService notifications, please visit www.psc.sc.gov to create a My DMS account.
- ☐ The Applicant DOES NOT AGREE to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System.

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Jennence Chasler
Applicant's Signature

Owner
Title of Applicant (e.g. President, Owner, etc.)

STATE OF SOUTH CAROLINA)

COUNTY OF Richland)

SWORN TO BEFORE ME

This 1st day of FEB, 2022

Natalie A. Wilson
Notary Public

Commission Expires

Natalie A Wilson
NOTARY PUBLIC
State of South Carolina
My Commission Expires May 25, 2031

Print Application

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

PICKMYRIDES LLC, a limited liability company duly organized under the laws of the State of South Carolina on April 3rd, 2021, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal
of the State of South Carolina this 5th day
of April, 2021.

Mark Hammond
Mark Hammond, Secretary of State



UNITED SERVICES AUTOMOBILE ASSOCIATION

ADDL INFO ON NEXT PAGE MAIL MCH-M-I

AMENDMENT TO

(RECIPROCAL INTERINSURANCE EXCHANGE)
9800 Fredericksburg Road - San Antonio, Texas 78288
SOUTH CAROLINA AUTO POLICY
AMENDED DECLARATIONS
(ATTACH TO PREVIOUS POLICY)

State 04 05 08 09 Vch POLICY NUMBER
SC 337337 337337 Ter 01889 28 90U 710
POLICY PERIOD: (12:01 A.M. standard time)
EFFECTIVE JAN 14 2022 TO JUL 11 2022
OPERATORS
01 SFC TERRENCE R CHEESEBORO

Named Insured and Address

SFC TERRENCE R CHEESEBORO
101 STEEPLECHASE N
COLUMBIA SC 29209-4826

Description of Vehicle(s)

VEH	YEAR	TRADE NAME	MODEL	BODY TYPE	ANNUAL MILEAGE	IDENTIFICATION NUMBER	VEH USE ¹	WORKSHEET
							SYM	Other Way
04	10	INFINITI	FX35	4D	12000	JN8AS1MU9AM801204		
05	11	CHEV	CAMARO 2SS	CONV	7000	2G1FK3DJ3B9170251	P	
08	03	FORD	EXPEDITION	4D	7000	1FMPU15L03LB37062	P	
09	08	FORD	EXPEDITION	4D	7000	1FMPK20568LA07634	P	

The Vehicle(s) described herein is principally garaged at the above address unless otherwise stated. ¹ W-C-Work/School; B-Business; F-Farm; P-Pleasure

VEH 04 COLUMBIA SC 29209-4826

VEH 08 COLUMBIA SC 29209-4826

VEH 05 COLUMBIA SC 29209-4826

VEH 09 COLUMBIA SC 29209-4826

This policy provides ONLY those coverages where a premium is shown below. The limits shown may be reduced by policy provisions and may not be combined regardless of the number of vehicles for which a premium is listed unless specifically authorized elsewhere in this policy.

COVERAGES	LIMITS OF LIABILITY ("ACV" MEANS ACTUAL CASH VALUE)	VEH 04 6-MONTH		VEH 05 6-MONTH		VEH 08 6-MONTH		VEH 09 6-MONTH	
		D=DED AMOUNT	PREMIUM \$	D=DED AMOUNT	PREMIUM \$	D=DED AMOUNT	PREMIUM \$	D=DED AMOUNT	PREMIUM \$
PART A - LIABILITY									
BODILY INJURY	EA PER \$ 25,000								
	EA ACC \$ 50,000		148.62		106.36		140.81		120.58
PROPERTY DAMAGE	EA ACC \$ 25,000		110.29		81.58		122.59		128.33
PART C - UNINSURED MOTORISTS									
BODILY INJURY	EA PER \$ 25,000								
	EA ACC \$ 50,000								
PROPERTY DAMAGE	EA ACC \$ 25,000	D 200	66.02	D 200	60.89	D 200	60.89	D 200	60.89
PART C - UNDERINSURED MOTORISTS									
BODILY INJURY	EA PER \$ 25,000								
	EA ACC \$ 50,000								
PROPERTY DAMAGE	EA ACC \$ 25,000		106.76		98.47		98.47		98.47
PART D - PHYSICAL DAMAGE COVERAGE									
COMPREHENSIVE LOSS	ACV LESS	D 250	208.76	D 250	133.07	D 250	86.40	D 250	133.07
COLLISION LOSS	ACV LESS	D 250	217.43	D 250	157.92	D 250	87.75	D 250	113.32
TOWING AND LABOR			7.25		7.25		7.25		
VEHICLE TOTAL PREMIUM			865.13		645.54		604.16		662.22

-----ADJUSTMENT REASON-----

LIABILITY ADDED VEH 05 PART C - UM COV ADDED VEH 05

TOTAL PREMIUM - SEE FOLLOWING PAGE(S)

ENDORSEMENTS: ADDED 01-14-22 - NONE

REMAIN IN EFFECT (REFER TO PREVIOUS POLICY) - A402SC(01) 5100SC(05) A200SC(01)

INFORMATION FORMS: 999SC(26)

04 RSM4100000 05 XXX4000000 08 XXX4000000 09 XXX4000000

In WITNESS WHEREOF, the Subscribers of UNITED SERVICES AUTOMOBILE ASSOCIATION have caused these presents to be signed by their Attorney-in-Fact on this date JANUARY 13, 2022

James Syring
President, USAA Reciprocal Attorney-in-Fact, Inc.

James R. Syring

ACCEPTED FOR PROCESSING
2022 February 9 1:36 PM
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UNITED SERVICES AUTOMOBILE ASSOCIATION

(RECIPROCAL INTERINSURANCE EXCHANGE)
 9800 Fredericksburg Road - San Antonio, Texas 78288
 SOUTH CAROLINA AUTO POLICY
 AMENDED DECLARATIONS
 (ATTACH TO PREVIOUS POLICY)

Named Insured and Address

SFC TERRENCE R CHEESEBORO
 101 STEEPLECHASE N
 COLUMBIA SC 29209-4826

State		Veh		POLICY NUMBER
SC		Terr		01889 28 90U 710
POLICY PERIOD:		(12:01 A.M. standard time)		
EFFECTIVE JAN 14 2022 TO JUL 11 2022				

Description of Vehicle(s)

VEH	YEAR	TRADE NAME	MODEL	BODY TYPE	ANNUAL MILEAGE	IDENTIFICATION NUMBER	VEH USE*	WORK MILES	WORK DATE
							SYM		

The Vehicle(s) described herein is principally garaged at the above address unless otherwise stated. * W/C-Work/School; B-Business; F-Family; P-Pleasure

This policy provides ONLY those coverages where a premium is shown below. The limits shown may be reduced by policy provisions and may not be combined regardless of the number of vehicles for which a premium is listed unless specifically authorized elsewhere in this policy.

COVERAGES ("ACV" MEANS ACTUAL CASH VALUE)	LIMITS OF LIABILITY		VEH		VEH		VEH		VEH	
	D=DED AMOUNT	PREMIUM \$	D=DED AMOUNT	PREMIUM \$	D=DED AMOUNT	PREMIUM \$	D=DED AMOUNT	PREMIUM \$	D=DED AMOUNT	PREMIUM \$
UNDERINSURED MOTORISTS ADDED VEH 05			PART C -		UM PD		COV ADDED			
ADDED LIABILITY ADDED VEH 05			CHANGE IN USAGE VEH 05							
REVISED 6 MONTH PREMIUM...		\$ 2777.03	6 MONTH INCREASE...					\$ 347.30		
PREMIUM DUE AT INCEPTION. THIS IS NOT A BILL, STATEMENT TO FOLLOW.										
THE FOLLOWING COVERAGE(S) DEFINED IN THIS POLICY ARE NOT PROVIDED FOR:										
VEH 04 - MEDICAL PAYMENTS, RENTAL REIMBURSEMENT, PERSONAL INJURY PROTECTION										
VEH 05 - MEDICAL PAYMENTS, RENTAL REIMBURSEMENT, PERSONAL INJURY PROTECTION										
VEH 08 - MEDICAL PAYMENTS, RENTAL REIMBURSEMENT, PERSONAL INJURY PROTECTION										
VEH 09 - MEDICAL PAYMENTS, RENTAL REIMBURSEMENT, PERSONAL INJURY PROTECTION										

In WITNESS WHEREOF, the Subscribers at UNITED SERVICES AUTOMOBILE ASSOCIATION have caused these presents to be signed by their Attorney-in-Fact on this date JANUARY 13, 2022

James Syring
 President, USAA Reciprocal Attorney-in-Fact, Inc.

James A. Syring



SUPPLEMENTAL INFORMATION

EFFECTIVE JAN 14 2022 TO JUL 11 2022

The following approximate premium discounts or credits have already been applied to reduce your policy premium costs.

NOTE: Age or senior citizen status, if allowed by your state/location, was taken into consideration when your rates were set and your premiums have already been adjusted.

VEHICLE 04

AUTOMATIC PAYMENT PLAN DISCOUNT	-\$	25.09
DAYTIME RUNNING LIGHTS DISCOUNT	-\$	6.26
EARLY QUOTE DISCOUNT	-\$	25.09
MULTI-CAR DISCOUNT	-\$	107.88
PREMIER DRIVER LEVEL DISCOUNT	-\$	70.55

VEHICLE 05

ANNUAL MILEAGE DISCOUNT	-\$	31.13
ANTI-THEFT DISCOUNT	-\$	31.08
AUTOMATIC PAYMENT PLAN DISCOUNT	-\$	18.30
DAYTIME RUNNING LIGHTS DISCOUNT	-\$	4.42
EARLY QUOTE DISCOUNT	-\$	18.30
MULTI-CAR DISCOUNT	-\$	82.50
PREMIER DRIVER LEVEL DISCOUNT	-\$	51.45

VEHICLE 08

ANNUAL MILEAGE DISCOUNT	-\$	28.97
AUTOMATIC PAYMENT PLAN DISCOUNT	-\$	17.02
EARLY QUOTE DISCOUNT	-\$	17.02
MULTI-CAR DISCOUNT	-\$	83.44
PREMIER DRIVER LEVEL DISCOUNT	-\$	47.86

VEHICLE 09

ANNUAL MILEAGE DISCOUNT	-\$	32.01
AUTOMATIC PAYMENT PLAN DISCOUNT	-\$	18.81
DAYTIME RUNNING LIGHTS DISCOUNT	-\$	3.06
EARLY QUOTE DISCOUNT	-\$	18.81
MULTI-CAR DISCOUNT	-\$	85.56
PREMIER DRIVER LEVEL DISCOUNT	-\$	52.90